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body, a deep dose equivalent in excess of 0.1 rem (1 mSv); ² and

- (4) Individuals entering a high or very high radiation area.
- (b) Each licensee shall monitor (see §20.1204) the occupational intake of radioactive material by and assess the committed effective dose equivalent to—
- (1) Adults likely to receive, in 1 year, an intake in excess of 10 percent of the applicable ALI(s) in table 1, columns 1 and 2, of appendix B to §§ 20.1001–20.2402;
- (2) Minors likely to receive, in 1 year, a committed effective dose equivalent in excess of 0.1 rem (1 mSy); and
- (3) Declared pregnant women likely to receive, during the entire pregnancy, a committed effective dose equivalent in excess of 0.1 rem (1 mSv).

[56 FR 23398, May 21, 1991, as amended at 60 FR 20185, Apr. 25, 1995; 63 FR 39482, July 23, 1998]

Subpart G—Control of Exposure From External Sources in Restricted Areas

SOURCE: 56 FR 23398, May 21, 1991, unless otherwise noted.

§ 20.1601 Control of access to high radiation areas.

- (a) The licensee shall ensure that each entrance or access point to a high radiation area has one or more of the following features—
- (1) A control device that, upon entry into the area, causes the level of radiation to be reduced below that level at which an individual might receive a deep-dose equivalent of 0.1 rem (1 mSv) in 1 hour at 30 centimeters from the radiation source or from any surface that the radiation penetrates;
- (2) A control device that energizes a conspicuous visible or audible alarm signal so that the individual entering the high radiation area and the supervisor of the activity are made aware of the entry; or
- (3) Entryways that are locked, except during periods when access to the areas

² All of the occupational doses in §20.1201 continue to be applicable to the declared pregnant worker as long as the embryo/fetus dose limit is not exceeded.

is required, with positive control over each individual entry.

- (b) In place of the controls required by paragraph (a) of this section for a high radiation area, the licensee may substitute continuous direct or electronic surveillance that is capable of preventing unauthorized entry.
- (c) A licensee may apply to the Commission for approval of alternative methods for controlling access to high radiation areas.
- (d) The licensee shall establish the controls required by paragraphs (a) and (c) of this section in a way that does not prevent individuals from leaving a high radiation area.
- (e) Control is not required for each entrance or access point to a room or other area that is a high radiation area solely because of the presence of radioactive materials prepared for transport and packaged and labeled in accordance with the regulations of the Department of Transportation provided that—
- (1) The packages do not remain in the area longer than 3 days; and
- (2) The dose rate at 1 meter from the external surface of any package does not exceed 0.01 rem (0.1 mSv) per hour.
- (f) Control of entrance or access to rooms or other areas in hospitals is not required solely because of the presence of patients containing radioactive material, provided that there are personnel in attendance who will take the necessary precautions to prevent the exposure of individuals to radiation or radioactive material in excess of the limits established in this part and to operate within the ALARA provisions of the licensee's radiation protection program.

§ 20.1602 Control of access to very high radiation areas.

In addition to the requirements in §20.1601, the licensee shall institute additional measures to ensure that an individual is not able to gain unauthorized or inadvertent access to areas in which radiation levels could be encountered at 500 rads (5 grays) or more in 1 hour at 1 meter from a radiation source or any surface through which the radiation penetrates.